

Office of the Attorney General
Division of Consumer Affairs
Legalized Games of Chance Control Commission
124 Halsey Street, P. O. Box 46000
Newark, NJ 07101
(973) 273-8000

LGCCC Form 12
Power of Attorney — Individual

STATE OF _____ }
COUNTY OF _____ } ss.:

I, _____, being
duly sworn, depose and state that I am over the age of eighteen years and reside at
_____.

I hereby appoint the Executive Officer of the Legalized Games of Chance Control Commission of the State of New Jersey and his/her designee in office my attorney upon whom may be served all processes in any matter concerning the Legalized Games of Chance Control Commission and any and all laws which it administers or are applicable to it including, but not limited to the Bingo Licensing Law and the Raffles Licensing Law and the regulations promulgated thereunder.

And I hereby agree that any processes so served shall be of the same effect as if duly served upon me within the State of New Jersey.

(signature)

Sworn to before me this _____
day of _____, 20____.

Notary Public in the State of _____

My Commission expires _____

[seal]